PTO/SB/06 (12-04)

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless & displays a visid CMB control number. PATENT APPLICATION FEE DETERMINATION RECORD 10803479 Substitute for Form PTO-875 Effective December 8, 2004 APPLICATION AS FILED - PART I OTHER THAN (Column 1). SMALL ENTITY OR · (Column 2) SMALL ENTITY NUMBER FILED NUMBER EXTRA FOR RATE (\$) FEE (1) RATE (\$) FEE (S) BASIC FEE NA N/A 150.00 NVA 137 CFR 1 18(4) [0] & [C] N/A 300.00 SEARCH FEE NA N/A NA \$250. N/A (37 CFR 1 16(N. 14. or (m)) \$600 **EXAMINATION FEE** N/A N/A NVA \$100 NA \$200 (37 CFR) 16(0), (p), or (q)) TOTAL CLAMAS X\$ 25 07.CFR 146(1) X\$50 minus 20 = OR **ENDEPENDENT CLAIMS** X100 X200 minus 3 **(1)** CFR 1 16(h)] If the specification and drawings exceed 100 APPLICATION SIZE sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each 07 CFR 1 16(4)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). +180= MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1 16()) **4360*** Hithe difference in column 1 is less than zero, enter "O" in column 2. TOTAL TOTAL APPLICATION AS AMENDED - PART II : OTHER THAN OR (Column 1) (Column 2) (Column 3): SMALL ENTITY SMALL ENTITY CLAIMS HIGHEST PRESENT REMAINING NUMBER RATE (1) ADDI-RATE (S) ADOI-TIONAL FEE(S) AFTER PREVIOUSLY **EXTRA** TIONAL MENDMENT PAID FOR FEE (\$ Of CFR LIGH U Minus X\$ 25 X\$50 OR Independent Minus X100 X200 OR Application Size Fee (37 CFR 1.16(s)) **4180=** FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (17 CFR 1.160) 4360= OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST NUMBER PRESENT REMAINING RATE (1) ADDI-RATE (\$) ADOI-EXTRA AFTER. PREVIOUSLY TIONAL TIONAL FEE (S) **AMENDMENT** PAID FOR FEE (\$) Total Minus X\$ 25 . X\$50 OR Independent GIF CFR 1.160.11 Minus . X100 X200 OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.160) +360= +180= OR TOTAL TOTAL OR ADD'L FEE ADD'L FEE • If the entry in column 1 is less than the entry in column 2, write " in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The Highest Number Previously Paki For (Total or Independent) is the highest number found in the appropriate box in column 1

a collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the PTO to process) an application. Confidentiality is governed by 35 U.S.O. 122 and 37 OFR 1.14. This collection is estimated to take 12 minutes to complete, buding gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient Trademark Office, U.S., Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS DRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.